



CLINIC CRIER

June 2000



From the Commanding Officer: Captain Kathleen D. Morrison, MSC, USN

Dear NMCLA Family!

In May we sent over 900 Navy and Marine Corps Officers to the fleet with a tremendous celebration! Each of you contributed to the successful medical commissioning of these officers. Your leadership, coaching and ambassador skills ensured that they have an understanding of Navy Medicine roles and responsibilities. Our unique mission of providing health services to the Brigade is seen by your daily proactive approaches to delivering top quality health care!

I am hoping June finds you energizing with leave, family, and summer activities as we ready ourselves for the Class 2004 arrival! For those new staff members, standby by for this I-Day experience of unique health care delivery, emotions, and traditions! The returning I-Day veteran (who gets the award this year? ☺) offers performance improvement, a calming influence and history! Together with the USNA team, it is a time that leadership and your professionalism set the tone for this labor-intensive summer—no other Navy MTF has opportunity to experience

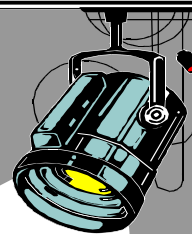
this! We can be proud of our special contributions! Your flexibility, leadership, and clinical excellence will set the tone for Plebe summer as you will be the medical leaders at all levels in interacting with the plebes, midshipmen, and USNA staff. Whether it is supporting MST, PEP, Bancroft Hall or sick call, quality medical care and patient safety will continue to be the foundation of our health care delivery. As we do through the year, we are always looking for opportunities to minimize the midshipman's time away from the training and academic environment.

The resource shortages regarding manpower, \$, space and time ☺ require full time monitoring. We will be funding TAD support to assist with manpower surges. Thanks to the administrative staff and HMCS Garrett for his work in getting vacant H/M billets filled expeditiously. LT Seymour and Resources Department (Computers too) are working the limited fiscal picture every day.

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Civilian Spotlight Harry Wiles



Ray, as he is fondly called, reported to the Naval Medical Clinic in November, 1999. Serving as Lead Medical Records Technician, Patient Administration Department, he has easily adapted to the myriad of duties involving medical records maintenance. In a very short time, he developed a comprehensive checklist outlining episodic investigative procedures for locating medical records, which clearly demonstrated his personal commitment to improved medical record availability and enhanced data quality.

Ray is quick to comment that everyone in the clinic made him feel like he was part of the team. "The military and civilian staff have always been there for me whenever I needed help or had a question." He sincerely admires the outstanding people who work here and enjoys all the nice, new friends he has met.

Ray and his wife, Gail, have a five-month old daughter, Megan Casey, and they reside in Annapolis. In addition to sports and fishing, Ray just discovered a new hobby and that is spending most of his time with his beautiful daughter.

What's in store this month?

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From the Executive Officer: Internet Usage Captain William A. Kelley, MC, USN

As we forge ahead with great technologic advances, we sometimes move at a slower pace with regards to the ethics connected to the technology. As an example, technology now exists that allows us to monitor and track all of your Internet sites visited. This technology has been proclaimed and used by many military and civilian institutions as a means of improving productivity, screening for and eliminating criminal usage of the worksite networks, and prosecuting those who would abuse the system.

However, we also have other methods of accomplishing the same means. Developing a policy of proper internet usage, educating the workforce of proper internet usage, and enforcement of work productivity at the departmental levels should be as effective as any automated “e-mail reader.”

Our staff is entrusted daily with matters that involve, at times, the highest levels of responsibility. We expect you to meet those levels of responsibility and you should expect from the command that we trust you to carry out those responsibilities.

Effective immediately, Internet site usage shall not be monitored either randomly or continuously by IM/IT staff or by anyone from the Command Suite. We charge you with implementing your own responsible personal Internet usage policy as we develop new Internet policies.

The automated software will not be deactivated because it is necessary for tracing bottlenecks or bandwidth slowdowns. However, it will not be used for monitoring your Internet usage *with one caveat: If your fellow workers determine that your Internet usage is inordinate to your work productivity or is inappropriate in legality, a permanent record is on file!*

While you are using the Internet, here are some useful sites to visit:

- <http://imcenter.med.nav.mil/telelibrary/statref.htm>

This site contains a collection of 30 full text medical textbooks covering a wide range of topics. The textbooks can be searched all at once or in combination. Stedman’s Medical Dictionary is also included as a supplemental reference.

Another great site is Medscape Select. Register free at www.medscape.com. This site’s claim to fame is Medline searches that are conducted only in select clinical medical and surgical journals, omitting “bench” science journals to bring relevant results, faster.

PROCESS IMPROVEMENT

Ambulatory care organizations are rapidly realizing that the world of health care is dramatically changed. Ambulatory care organizations must be able to compete to survive and prosper. Providing high quality care is challenging – it means that treatment is appropriate, available when needed, and delivered in timely fashion. Care must be provided in a respectful and caring manner. It must also be effective, safe, efficient, and well coordinated over time and among practitioners and settings. Ambulatory organizations that systematically improve the quality of care delivery can expect superior outcomes, more competitive costs, and high levels of patient satisfaction. Delivery of high quality care is directly related to performance of critical systems, and the effective, coordinated performance of multiple jobs and tasks.

WHAT ARE THE GOALS OF IMPROVEMENT?

Improvement is a continuous process. Not “optimal” performance. The goals are specific, measurable, and sustained. Improvements target processes but address any issues associated with individual clinicians or staff.

HOW DO WE IMPROVE PROCESSES?

Processes are improved by using a systematic method to plan, test, assess, and fully implement the changes (FOCUS-PDCA). Tools are used to assess data, including flowcharts, run charts, cause-and-effect diagrams. Critical paths are used to design new processes, redesign existing processes, monitor outcomes, and evaluate cost effectiveness of care.

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From the Command Senior Chief

HMCS(SW/FMF) Steven G. Rogers, USN

I'd like to first thank every staff member for your show of support at the Change-of- Office on the 21st of April, with special thanks to LTs Ramirez, Gabel, and HM3 Disney for their acappella performance of the National Anthem. It was exciting for both Master Chief Ballantyne and myself. I am also excited about my new position as YOUR Command Senior Chief. As I stated on 21 April, I plan on "getting around" the clinic as much as possible. I hope you have noticed me doing such. If I'm not in your workspace as much as you believe I should be, please challenge me to appear more often. I can only tell you how my feet feel it at the end of each day (much more taxing than running).

Please use the Chain-of-Command. I believe in it, and I challenge each of you to be that positive link in the Chain-of-Command. As you conduct your daily duties, please keep in mind that: Management is doing things right; Leadership is doing the right things.

Congratulations to HM2 Faye Richardson for her selection as Senior Sailor of the Quarter, and HN Justin Rose for his selection as Junior Sailor of the Quarter for 1st Quarter of Calendar Year 2000. What an exciting way to start off the year 2000 for both of these outstanding Sailors!

As we approach Plebe Summer, please keep in mind that we have new staff members and TAD personnel who will be experiencing this for the first time. As you go full speed ahead in your duties, don't forget to take the time to train, educate, and assist these Sailors. Please help them out, as I'm sure someone did for you during your first summer here. And, please, always keep SAFETY in the forefront of your mind. As we gear up for Plebe Summer, please take time out to think about yourself and your family. Take the time off you deserve and have earned prior to Induction Day. Spend sometime on yourself, and your family. Make some of those appointments you may have been putting off. School physical for your child... or perhaps a visit to dental for yourself. Take care of your, and your families needs prior to Induction Day. Let's ALL have a safe and rewarding summer!

HAPPY 102ND BIRTHDAY - NAVY HOSPITAL CORPS

CO's Comments Continued - continued from page 1

Each of you plays a part in making this a better command—please let your shipmates know how you appreciate their efforts.

Please continue your JCAHO inspection efforts with updating instructions, organizational manuals, and professional development files (PDF's). The updated PDF's are especially important, as staff is cross-trained in a variety of clinical areas. Remember that JCAHO is looking at processes, our documentation, compliance with our policies, and how we measure the outcomes!

Thanks to HMC Fabian and Mr. Deguzman (AKA De) for volunteering to continue the NMCLA Clinic Crier. This talented team will allow the clinic and family to share the latest news! Thanks for your continued leadership, Chief and De! ☺ Any interest for the Mentoring Program? With our senior experienced staff and the junior officer and enlisted personnel we have maximum opportunity to utilize the Mentoring Program.

Happy Birthday to the Hospital Corps—102 years of caring and treating Navy and Marine Corps personnel from the battlefield to the parade field. We are all proud to serve with you and share your legacy.

We bid several shipmates farewell—each of them carries the Annapolis story with them. Welcome Aboard to our new staff—we are glad you are here. Remember that the NMCLA family includes past and present military, civilian, contractors and volunteers. Please take care of each other and take time for each other! Be safe as we head into this busy summer.

R/CO



HAIL!

CAPT D. McClain - DCCS
HM2 S. Doersom - Phys Ther
HM2 Y. Snodgrass - X-Ray
HM3 L. Mars - Patient Admin
HN O. Estero - Patient Admin
Dr. P. Held - Clin Psych
Ms. P. Weaver - PCC

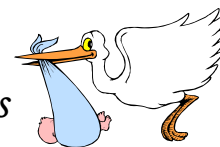
CONGRATULATIONS!

CAPT (Sel) J. Daniel
HM1 M. Clingerman
HM1 R. Moesch
HM2 J. Watson
HM2 J. Yeddo
HM3 N. Wright
**Ms. Eva Miller - Bronze Winner for
Federal Excellence**

FAREWELL!

LCDR J. Schindler - Civlant
LCDR A. Wolfe - Civlant
LT M. Rosenthal - NH Jax
HCMC H. Ballantyne - Flt Res
HMC K. Winstead - Flt Res
HM3 R. Thorpe - USNH Naples
HN J. Phillips - Civlant
HN M. Pryor - Civlant
HN N. Wright - Civlant
Ms. C. Bornemann - Geneva

New Deliveries



Dylan Harrison to HM3 Gregoire, April 20th
Virginia Anne to Mr. J. Joy, May 23rd
Matthew Edward to LTJG B. Grady, April 6th

Wedding Wishes...



*HM2 J. Klimczak and
HM3 V. Martino*

TRICARE question and answer from Bureau of Medicine and Surgery:

Question: What is a Primary Care Manager (PCM)?

Answer: A PCM is a medical professional, or a team of providers, in a military hospital or clinic, or in a civilian network, who will assume primary responsibility for providing, arranging and coordinating an enrollee's total health care. A physician designated as a PCM could be one who practices in General or Family Practice, Internal Medicine, Pediatrics and OB/GYN. Nurse Practitioners and Physician's Assistants who are privileged to provide primary care services may be organized as part of the PCM team. For more information, visit the TRICARE website at <http://www.tricare.osd.mil>.

PROCESS IMPROVEMENT

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The purpose of ambulatory care is to maximize a patient's health and to use resources efficiently and appropriately. The use of resources and care outcomes are affected by the performance of the organization. How well do we do appropriateness, availability, efficiency, timeliness, effectiveness, continuity, safety, and respect and caring? The degree to which we do these things well is strongly influenced by the design and operation of a series of important functions and tasks. Leadership and collaboration are essential.

An organization's performance is evident by measuring patient outcomes, customer satisfaction and perception of quality, and costs.

Eva Miller

Performance Improvement Coordinator